

United States Environmental Protection Agency

WASHINGTON, DC 20460 **Annual Reporting Form GENERAL INFORMATION** Rodney Hunt Company | | | | 1. Facility Name: MAR05CV20 2. NPDES Permit Tracking No.: 3. Facility Physical Address: b. City: | Or angle | c. State: MA d. Zip Code: 0 1 3 6 4 - | | | Todd Ostrowski Consultant 4. Lead Inspectors Name: Barry Brock lesby Malintenance Supervis Additional Inspectors Name(s): 5. Contact Person: Barry Brocklesby Malintenance Supervis Phone: 978-1544-25111Ext. 110 | E-mail: BarrryBarlodneyhunt.com 09/11/1/2009 6. Inspection Date: **GENERAL INSPECTION FINDINGS** 1. As part of this comprehensive site inspection, did you inspect all potential pollutant sources, including areas where industrial activity may be exposed to stormwater? If NO, describe why not: NOTE: Complete Section C of this form for each industrial activity area inspected and included in your SWPPP or as newly identified in B.2 or B.3 below where pollutants may be exposed to stormwater. 2. Did this inspection identify any stormwater or non-stormwater outfalls not previously identified in your SWPPP? 🔲 YES 🛛 NO If YES, for each location, describe the sources of those stormwater and non-stormwater discharges and any associated control measures in place:

3. Did this inspection identify any sources of stormwater or non-stormwater discharges not previously identified in your SWPPP? 🔲 YES 💹 NO
If YES, describe these sources of stormwater or non-stormwater pollutants expected to be present in these discharges, and any control measures in place:
4. Did you review stormwater monitoring data as part of this inspection to identify potential pollutant hot spots? 🔲 YES 🔲 NO 🔽 NA, no monitoring performed
If YES, summarize the findings of that review and describe any additional inspection activities resulting from this review:
No stormwater monitoring has occurred under the 2008 MSGP to date as a result of difficulty in obtaining stormwater discharge (6/9/2009 - No flow from catchbasins, 9/11/2009 - No flow from catchbasins). However, a review of historical sampling data was performed to identify potential pollutant hot spots. A review of historical sampling data indicates that Outfalls #01 and 02 exceed the benchmark limits for Total Suspended Solids, Total Iron, and Total Aluminum. Personnel will inspect all outdoor areas to ensure they remain free of tracked debris (i.e. metal shavings, dust). In the event that debris is encountered, it will be swept up immediately to ensure it does not impact the quality of the stormwater runoff.
5. Describe any evidence of pollutants entering the drainage system or discharging to surface waters, and the condition of and around outfalls, including flow dissipation measures to prevent scouring:
All catchbasins and stormwater outfalls were inspected. Catchbasins appeared to be in good condition overall but will need to get cleaned out due to dirt/debris in sump. There was little evidence of sediments / dust entering into the drainage system.
All stormwater outfalls were found to be in good overall condition. In general, the outfalls discharge to rip-rap leading into the River to prevent scouring. Additionally, the outfalls were surrounded by vegetation, thereby reducing the likelihood for erosion and scouring.
and the second s
6. Have you taken or do you plan to take any corrective actions, as specified in Part 3 of the permit, since your last annual report submission (or since you received authorization to discharge under this permit if this is your first annual report), including any corrective actions identified as a result of this annual comprehensive site inspection? YES NO
If YES, how many conditions requiring review for correction action as specified in Parts 3.1 and 3.2 were addressed by these corrective actions?
NOTE: Complete the attached Corrective Action Form (Section D) for each condition identified, including any conditions identified as a result of this comprehensive stormwater inspection.



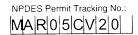
C. INDUSTRIAL ACTIVITY AREA SPECIFIC FINDINGS							
Complete one block for each industrial activity area where pollutants may	be exposed	d to stormwater. Copy this page for additional industrial activity areas.					
In reviewing each area, you should consider: Industrial materials, residue, or trash that may have or could come into contact with stormwater; Leaks or spills from industrial equipment, drums, tanks, and other containers; Offsite tracking of industrial or waste materials from areas of no exposure to exposed areas; and Tracking or blowing of raw, final, or waste materials from areas of no exposure to exposed areas.							
INDUSTRIAL ACTIVITY AREA:							
1. Brief Description:							
Sand Blasting and Metal Surface Cleaning							
Are any control measures in need of maintenance or repair?	☐ YES	☑ NO					
3. Have any control measures failed and require replacement?	☐ YES	☑ NO					
4. Are any additional/revised control measures necessary in this area?	☑ YES	□NO					
If YES to any of these three questions, provide a description of the problem: Corrective Action Form)	(Any nece	ssary corrective actions should be described on the attached					
During the inspection, dust being formed from Sand Blasting operations was migrating from the building, which could potentially impact stormwater quality. The facility has begun to implement corrective actions through the installation of a dust collection system to reduce likelihood of dust and sand particles exiting the building.							
INDUSTRIAL ACTIVITY AREA:							
1. Brief Description:							
Painting Operations							
2. Are any control measures in need of maintenance or repair? 3. Have any control measures failed and require replacement? 4. Are any additional/revised c necessary in this area? If YES to any of these three questions, provide a description of the problem: Corrective Action Form)	☐ YES ☐ YES ☐ YES : (Any nece	☑ NO ☑ NO ☑ NO ☑ NO æssary corrective actions should be described on the attached					
INDUSTRIAL ACTIVITY AREA: Brief Description: Spills and Drips							
2. Are any control measures in need of maintenance or repair? 3. Have any control measures failed and require replacement? 4. Are any additional/revised BMPs necessary in this area? If YES to any of these three questions, provide a description of the problem.	☐ YES ☐ YES ☐ YES ☐ YES	☑ NO ☑ NO ☑ NO ☑ NO æssary corrective actions should be described on the attached					
Corrective Action Form) The facility appeared to be free of spills and drips. According							



		NOTE: Copy this page and attach additional pages as necessary		
INDUSTRIAL ACTIVITY AREA:				
1. Brief Description:				
Metal Preparation (including grinding, welding, sawing	ıg, shavin	g, brazing, bending, cutting, and etching)		
2. Are any control measures in need of maintenance or repair?	☐ YES	☑ NO		
Have any control measures failed and require replacement?	☐ YES	☑ NO		
4. Are any additional/revised BMPs necessary in this area?	☐ YES	☑ NO		
If YES to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form)				
All of the above-described operations continue to occ	cur indooi	rs.		
INDUSTRIAL ACTIVITY AREA:				
Brief Description:				
Surface Treatment (Including finishing, chemical coa	ating, polis	shing, and abrasive cleaning)		
(3,1	5/		
Are any control measures in need of maintenance or repair?	☐ YES	☑ NO		
3. Have any control measures failed and require replacement?	☐ YES	☑ NO		
4. Are any additional/revised BMPs necessary in this area?	☐ YES	☑ NO		
If YES to any of these three questions, provide a description of t Corrective Action Form)	the problem:	: (Any necessary corrective actions should be described on the attached		
All surface treatment operations occur indoors to min	nimize the	e likelihood of contact with stormwater.		
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INDUSTRIAL ACTIVITY AREA:				
1. Brief Description:				
Heavy Equipment Use and Storage				
0.0	□ vec	F7I NO		
2. Are any control measures in need of maintenance or repair?	YES	☑ NO		
3. Have any control measures failed and require replacement?	YES	☑ NO		
4. Are any additional/revised BMPs necessary in this area?	YES	(Apu page can page at the actions should be described on the attached		
Corrective Action Form)		: (Any necessary corrective actions should be described on the attached		
Preventative maintenance regularly occurs on all he	avy equip	oment to prevent leaking fluids.		
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C. INDUSTRIAL ACTIVITY AREA SPECIFIC FINDINGS							
Complete one block for each industrial activity area where pollutants may b	e exposed	to stormwater. Copy this page for additional industrial activity areas.					
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INDUSTRIAL ACTIVITY AREA:							
1. Brief Description:							
Equipment and Vehicle Maintenance							
Are any control measures in need of maintenance or repair?	☐ YES	№ №					
3. Have any control measures failed and require replacement?	☐ YES	☑ NO					
A. Are any additional/revised control measures necessary in this area? If YES to any of these three questions, provide a description of the problem: Corrective Action Form)	☐ YES (Any nece	☑ NO ssary corrective actions should be described on the attached					
All equipment and vehicle maintenance activities occur indoor regulations.	s. Spent	fluids are disposed of in accordance with state and federal					
INDUSTRIAL ACTIVITY AREA:							
1. Brief Description:							
Raw and Finished Material Storage							
2. Are any control measures in need of maintenance or repair?	☐ YES	☑ NO					
3. Have any control measures failed and require replacement?	☐ YES	☑ NO					
Are any additional/revised c necessary in this area? If YES to any of these three questions, provide a description of the problem: Corrective Action Form)	☐ YES (Any nece	☑ NO essary corrective actions should be described on the attached					
INDUSTRIAL ACTIVITY AREA:							
Brief Description: Furnace Operations and Pollution Control Equipment							
2. Are any control measures in need of maintenance or repair?	☐ YES	☑ NO					
3. Have any control measures failed and require replacement?	☐ YES	☑ NO					
Are any additional/revised BMPs necessary in this area? If YES to any of these three questions, provide a description of the problem: Corrective Action Form)							
All pollution control equipment appears to be in good working	order an	d remains free of any air leaks, which could generate dust.					



		NOTE: Copy this page and attach additional pages as necessary
INDUSTRIAL ACTIVITY AREA:		
1. Brief Description:		
Plant Yard		
Are any control measures in need of maintenance or repair?	☐ YES	☑ NO
3. Have any control measures failed and require replacement?	☐ YES	☑ NO
4. Are any additional/revised BMPs necessary in this area?	☐ YES	☑ NO
•		(Any necessary corrective actions should be described on the attached
All areas that could potentially be subject to erosion	n and sedim	nent loss are vegetated.
INDUSTRIAL ACTIVITY AREA:		
Brief Description:		
2. Are any control measures in need of maintenance or repair?	☐ YES	NO
Have any control measures failed and require replacement?	☐ YES	NO
Are any additional/revised BMPs necessary in this area?	YES	NO
If YES to any of these three questions, provide a description of Corrective Action Form)	of the problem:	: (Any necessary corrective actions should be described on the attached
INDUSTRIAL ACTIVITY AREA:		
1. Brief Description:		
		□NO
2. Are any control measures in need of maintenance or repair?	☐ YES	□ NO
3. Have any control measures failed and require replacement?	☐ YES	□ NO
4. Are any additional/revised BMPs necessary in this area?	-	: (Any necessary corrective actions should be described on the attached
Corrective Action Form)	o. the problem	,

D. CORRECTIVE ACTIONS
Complete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy this
page for additional corrective actions or reviews.
Include both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to address problems identified in this comprehensive stormwater inspection. Include an update on any outstanding corrective actions that had not been completed at the time of your previous annual report.
1. Corrective Action #
2. Is this corrective action:
An update on a corrective action from a previous annual report; or
☐ A new corrective action?
3. Identify the condition(s) triggering the need for this review:
☐ Unauthorized release or discharge
☐ Numeric effluent limitation exceedance
Control measures inadequate to meet applicable water quality standards
Control measures inadequate to meet non-numeric effluent limitations
Control measures not properly operated or maintained
Change in facility operations necessitated change in control measures
☐ Average benchmark value exceedance
Other (describe):
4. Briefly describe the nature of the problem identified:
5. Date problem identified: / / / / / / / / / / / / / / / / / / /
6. How problem was identified:
☐ Comprehensive site inspection
☐ Quarterly visual assessment
☐ Routine facility inspection
☐ Benchmark monitoring
☐ Notification by EPA or State or local authorities
☐ Other (describe):
7. Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analyses to be conducted, etc.) or if no modifications are needed, basis for that determination:
8. Did/will this corrective action require modification of your SWPPP?
9. Date corrective action initiated:
10. Date correction action completed: / / / / or expected to be completed: / / / / / / / / / / / / / / / / / / /
11.If corrective action not yet completed, provide the status of corrective action at the time of the comprehensive site inspection and describe any remaining steps (including timeframes associated with each step) necessary to complete corrective action:

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E. ANNUAL REPORT CERTIFICATION	Į
1. Compliance Certification	
Do you certify that your annual inspection has met the requirements of Part 4.2 of the permit, and that, based upon the results of this inspection, to the byour knowledge, you are in compliance with the permit?	iest of
If NO, summarize why you are not in compliance with the permit:	
2. Annual Report Certification	
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I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed assure that qualified personnel property gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, acculant complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	ie urate,
Authorized Representative Printed Name. BARRY BEGCKLES BY Title: MAV W7 CMCE MARRIES &	
Signature: Date Signed: 9/21/09	